#### CENTRAL REGIONAL TRAUMA ADVISORY COMMITTEE

July 21, 2011

Dufresne Auditorium, Benefis Hospital East Campus Great Falls

#### **MINUTES**

1200-12:30 Lunch sponsored by Benefis Hospitals **Dufresne Auditorium** 

12:30 REACH Network **ON** for Central RTAC meeting

The Central Montana Rural Trauma Advisory Committee (CRTAC) was called to order at 12:30 PM. by Lauri Jackson, Trauma Coordinator, Benefis Health Systems

1. Roll call

**PRESENT** In Great Falls:

Chad Engan M.D., Chair

Lauri Jackson, APRN, Great Falls Shannon Garner RN Mercy Flight

Will Fleming EMT-P GFES, Great Falls

Dirk Johnson, GFFD, Great Falls

Michael Rosalez, EMT-P, Great Falls

Marie Haynes Trauma Registrar Great Falls

Jennie Nemec RN, State Trauma System Program Manager

Carol Kussman RN, EMS and Trauma Systems

Chris Ludlum, Benefis ER Director

Tim Sinton PA, Great Falls

Judy Jacoby RN, Broadwater Health Care, Townsend

Scott Schandelson, Chief Flight Nurse Mercy Flight

Lauri Jackson

**REGION** 

**Conrad** 

Laura Erickson, RN,

Cliff Davis PA.

Kathy Jones RN,

Charlene Bouma EMT,

Van Lovitt EMT,

**Shelby** 

Phil Ashiem EMT,

Doug Christopherson EMT,

Julia Drishinski RN.

Chester

Kayla Johnson,

Gladys Young MD

Todd Wankin

James Dahlin

**Fort Benton** 

Deb Gessaman, EMT

Linda Williams EMT

White Sulphur Springs Pearl Delgado RN

Leigh Keiter RN

**ABSENT:** Representatives from: Cut Bank, Havre, Browning

#### 2. Approval of previous meeting minutes

Lauri Jackson APRN.

Minutes approved

#### 3 State Trauma Care Committee activities & State Trauma Update

State Trauma Care Committee: Next Meeting Wednesday, August 10, 2011

- Continue to work on System issues:
  - Pediatric neuro surgeons nationally 75 % not accepting pediatric pts
  - Level II Neuro coverage problem ACS says if none becomes a level III
  - EMS trip reports
  - Deaths
  - GCS < 9 not intubated

- ET Study 7 minute video regarding this study is available on EMSTS website see for questions and answers
- Interfacility transfers
- Commencing 3rd Rural Preventable Mortality Study looking at mechanical trauma death for 2008. Primary Investigators

Thomas Esposito, MD, MPH, FACS, Loyola University Stitch School of Medicine, Chicago

Stuart Reynolds, MD, FACS, Havre

All aggregated results& conclusions

May differentiate between 'rural" and "urban" but no more specific than that

Care will NOT be compared to resources not available (as in "preventable if had available neurosurgeon

No facility –specific conclusions

No facility – specific feedback

Will utilize new ACS "Nomenclature" in classification and conclusions

448 included cases

Initial PM Study panel orientation meeting September 27 & 28, 2011 in Helena @ Cogwell building RM 207.

# State Designation/Verification

Re-designations: Livingston CTF, Red Lodge TRF, Culbertson TRF

Due: Wolf Point TRF, Poplar TRF, Malta TRF, Plains CTF, Anaconda CTF

New Designation; Sheridan TRF New Review; Plentywood TRF

New applications: Choteau TRF, Shelby TRF, Forsyth TRF, Columbus TRF

#### **ACS**

Level III/ MT Regional Trauma Center Verification /designation review

Bozeman Deaconess Hospital June 5&6, 2011

St. James Healthcare - Butte June 6&7, 2011

Community Medical Center, Missoula November2, 2011

- ACS update The American College of Surgeons Committee on Trauma has changed the nomenclature for classifying deaths. During the 2011 reporting period, it is acceptable to have mixed nomenclatures. The change will be effective beginning January 1, 2012
- OLD New

Preventable Unanticipated mortality with opportunity for improvement

Non-preventable Mortality without opportunity for improvement

Possibly preventable Anticipated mortality with opportunity for improvement

# **Updates:**

## Any dispatched call should be documented

- 1. Refusals
- 2. Cancelled en route
- 3. Non-transports
- 4. Deceased @ scene patients
- 5. Extricating, transporting bodies

### It's about the report, not the "trip"

Drop sheets are NOT a substitute for patient car reports. Due @ receiving facility w/in 48 hours (soon to be 24 hours).

New POLST forms available through EMSTS office; Contact Kevin Fitzgerald@ 406-444-6098, kfitzgerald@mt.gov

#### Courses

### **EMD Training**

- 1. Offering King-County-based EMD classed beginning this fall
- 2. Enhanced questioning techniques for medical calls
- 3. Pre-arrival instructions
- 4. Contac Joe Hansen@EMSTS:jhansen3@mtr.gov
- **ATLS Courses**: 2011 dates
- October 14&15 Missoula
- November 4&5 Billings

Applications can be found @ www.dphhs.mt.gov/ems If wish to be RN faculty or helper contact Gail Hatch 406 444 3746 Ghatch@mt.gov

# MT Systems Conference September 21, 2011

Applications can be found @ www.dphhs.mt.gov/ems

State will pay for two nights lodging at state rates for the systems conference

**Rocky Mountain Rural Trauma Symposium (RMRTS)** Sept 22 and 23 2011 Kalispell MT Register online www.45pr.com/calendar/calendar.htm

Central RTAC does have some scholarship money available. Scholarship applications have been sent to all Trauma Coordinators and EMS services in the region. Please complete the application and return to Lauri Jackson for scholarship committee review. Scholarships will be given based on participation in RTAC programs if applications exceed number of scholarships available,

**PHTLS:** Contact Rosie

TNCC: Benefis October contact Lauri or Mary Fry Davis

**ENPC:** Benefis October contact Lauri or Mary Fry Davis

ACTN (Advanced Course in Trauma Nursing): November in Billings Contact Penny Clifton @

St Vincent's Healthcare

**Preparedness** 

**BDLS: 361** participants have competed the course

ADLS: 132 participants have competed the course

ABLS: 4 Successful courses held around MT this past winter and spring

Total so far: 122

### Grant \$\$\$

**Hospital Preparedness** 

New Grant applications are out

Level II-III; \$30,000 All other facilities; \$15,000

"Must do";

Mass Fatality Planning

**Evacuations** 

NIMS compliance

Other issues CAN be funded if above are completed; Burns, Pediatric, Trauma

If application needed, Dayle Perrin, HPP

dperrin@mt.gov, 406-444-3898

> State Wide System Issue: Interfacility Transfers, Level of care required and how to provide this care

Neurosurgeon nationally 75% of neurosurgeons are not operating on children 53% neurosurgeons changed patient mix

Rural areas continue to struggle with challenges in consistent provision of bariatric appropriate care for patients requiring inter-Facility transport, EMS documentation, Crash documents, Inappropriate care, Law enforcement Montana Field Trauma Decision Scheme/Trauma Team Activation Criteria (hand out)

Anticoagulated trauma patients

#### **Central Region**

Need original EMS trip report (from first ambulance to touch patient) and all ER documentation to be sent with transferred patients

GCS <9 and patient not intubated. Will continue to provide and work to improve communication regarding feedback from transferred patient

- Decision to intubate not just based on Saturation
- When appropriate to intubate
- Documentation on children GCS, GCS educational tool
- Age
- ETOH
- Trauma Team courses

ET Study 5/01/10 EMSTS website

Obese Trauma Patients transfers by ground and flight continue to be problematic. Please try to give accurate weights for Air transport. 300 lb weight limit for both rotor & fixed wing. If pt obese will help you try to find alternantive transport options.

Importance of Anticoagulated Trauma Patients receiving proper treatment in the field and ER BLS/ALS rendezvous, Air Medical Activation

#### 4. Subcommittees

1. Injury Prevention/Education

Lauri Jackson APRN

- Stepping On program just finished fourth class
- Report on recent distracted driving course done at Safety First Rally in Great Falls
  Overall Texting while driving slowed participates time throaty course by 10%.
  The number of error (driving off the road, hitting object or people in the road, running a STOP sign) triple while texting and driving.

Will be happy to come to your community and assist with putting this course on.

# 2. Pre-Hospital Michael Rosalez EMT-P

- Necessity of GCS/ documentation on trauma patient
- Trip sheets include GCS on front clearly indicated Fairly well documented according to recent chart reviews
- Next QI project documentation "padding back boards" July and August 2011.
- Hand off reports necessity to receiving facility.
- 48 hour trip reports due changing to 24 hours soon
- Risk for children /restraints
- Use of restraints in Ambulances during transport
  - 1. Shoulder straps for transporting patients
  - 2. Restraints worn by providers in the back of AMB while transporting

#### 5. Public Comments

None

#### 6. Adjournment

Lauri Jackson, APRN

#### **Future CRTAC Meeting Dates 2011:**

October 20, 2011 (pre hospital meetings – October 18, 2011)

Telemedicine sites available in Big Sandy, Chester, Choteau, Conrad, Cut Bank, Fort Benton, Havre, Shelby, Helena and Great Falls

Respectfully submitted.

Marie Haynes Trauma Registrar, IP coordinator Benefis Healthcare